DO NOT SCAN! Please forward case and paper to address shown below. SPE RESPONSE FOR CERTIFICATE OF CORRECTION Paper No.: DATE : Request for Certificate of Correction for Appl. No **SUBJECT** Please respond to this request for a certificate of correction within 7 days. Please review the requested changes/corrections as shown in the attached certificate of correction. Please complete this form (see below) and forward it with the file to: Certificates of Correction Branch (CofC) South Tower - 9A22 Palm Location 7580 **Certificates of Correcti** 703-308-9390 ext. Thank You For Your Assistance The request for issuing the above-identified correction(s) is hereby: Note your decision on the appropriate box. Approved All changes apply. □ Approved in Part Specify below which changes do not apply. Denied State the reasons for denial below. Comments: